SWORN DISCLOSURE OF CONSULTING SERVICES

Tennessee Ethics Commission

→ This form must be used to disclose to the Tennessee Ethics Commission all compensation for consulting services. Please read the attached instructions before completing this form (the failure to properly and timely submit the form may constitute a Class C misdemeanor pursuant to T.C.A. §§2-10-125 & 126, subsections (d)(1) & (d)(2)).

CHECK THE APPLICABLE BOXES	
☐ Form Completed by Individual RECEIVING Fee	☑ Form Completed by Individual/Entity PAYING Fee
☐ New Disclosure Form ★️ Quarterly Upda	te (Provide date previous Disclosure Form submitted:)
DISCLOSURE OF INDIVIDUAL RECEIVING FEE	
a. First and last name of individual receiving fee	b. Position or Title of individual
Allan F. Ramsaur	Executive Director
c. Mailing or street address (room, apt., suite no. and street, or P.O. box)	
221 Fourth Avenue North, Suite 400	
d. City, state, zip code	
Nashville, TN 37219	·
e. Telephone	f. E-mail (if available)
(615) 383-7421	aramsaur@tnbar.org
DISCLOSURE OF PAYOR	
a. Name of individual or entity paying fee	
Tennessee Bar Association	
b. If different from above, name of individual submitting form on behalf of entity	
'Allan F. Ramsaur, Executive Director	
c. Mailing or street address of Payor (room, apt., suite no. and street, or P.O. box)	
221 Fourth Avenue North, Suite 400	
d. City, state, zip code	
Nashville, TN 37219	
	f. E-mail (if available)
e. (Telephone (615) 383-7421	f. E-mail (if available) aramsaur@tnbar.org
DISCLOSURE OF CONTRACT AND COMPENSATION	
a. Date of Contract	b. Amount of Fee
March 1998 c. Date(s) Services Rendered	\$15,780
January 1, 2009 - March 31,	2009
d. General Description of Services Rendered	
To influence legislative or administrative action.	
·	

AFFIDAVIT

By my signature below I attest to the following:

- I understand that, pursuant to T.C.A. §§2-10-125 & 126, submitting a Sworn Disclosure of Consulting Services form which contains false information may subject me to the penalties of perjury;
- The information contained in this Sworn Disclosure of Consulting Services form is true and correct to the best of my knowledge, information and belief.

M-F-Ru-Signature

'+ 8/09

8th day o

day of April in Davidson

county,

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Signature of Notary

Affix Notary Seal Here

Notary Registration No.

